

May 2, 2014

SUBJECT:

TO:

Los Angeles County Board of Supervisors

Gloria Molina

First District

Each Supervisor

Mark Ridley-Thomas

Second District FROM:

[ Mitchell H. Katz, M.D.

Zev Yaroslavsky

Third District

Don Knabe

STATUS REPORT ON KEY INDICATORS OF

PROGRESS, HOSPITAL OPERATIONS, AND OTHER ISSUES RELATED TO THE TRANSITION TO THE NEW LAC+USC MEDICAL CENTER – PROGRESS REPORT #99

Fourth District

Michael D. Antonovich
Fifth District

Mitchell H. Katz, M.D.

Director

Hal F. Yee, Jr., M.D., Ph.D. Chief Medical Officer

Christina R. Ghaly, M.D. Deputy Director, Strategic Planning This is to provide your Board with the monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This report is the full monthly operational report with trends to include the month of March 2014.

Census Trending (ADC includes Psychiatric & Newborn Patients)

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The Average Daily Census (ADC) for the month of March was 517 out of 676 licensed beds, an estimated 75% utilization rate (77% occupancy). The census for Medical/Surgical units was an estimated 85% utilization rate (87% occupancy) for March 2014.

www.dhs.lacounty.gov

# .gov Emergency Department (ED) Indicators

The attachment demonstrates a decrease in the average daily census (ADC) in comparison to February 2014. The ED boarding times, ED wait times, the rate of patients who left without being seen (LWBS), and number of patients transferred out for this period were stable. The Dangerously Overcrowding Level Comparison for March 2014 was 0.5% compared to 6.0% in February 2014.

If you have any questions or need additional information, please contact me or Dan Castillo, LAC+USC Chief Executive Officer, at (323) 409-2800.

DC:ab

#### Attachment

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.



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Indicator	Definition	Data	Comments
Indicator #1	- Trends in Average D	aily Census and Hospital Operations Metrics	
1a. Average Daily Census (ADC)	ADC: A measure of the total number of inpatients occupying licensed beds on a daily basis reported as the arithmetic mean.  Calculation: Total number of admitted inpatients at 12:00 AM midnight daily, summed over the month and divided by the total number of days in the month.  Source of Data: Affinity	ADC  ADC  ADC  ADC  ADC  ADC  ADC  ADC	ADC provided as background information.  Graphs depict data from January 2011 to present.

Operational Monitoring Report Reporting Period: March 2014

## Indicator #1 – Trends in Average Daily Census and Hospital Operations Metrics

# 1b. Occupancy Rate LAC+USC Medical Center

#### Definition:

A measure of the usage of the licensed beds during the reporting period that is derived by dividing the patient days in the reporting period by the licensed bed days in the reporting period.

#### Calculation:

The total number of admitted inpatients at 12:00 AM midnight, including women in labor, may include normal newborns and psychiatric inpatients divided by licensed or budgeted beds.

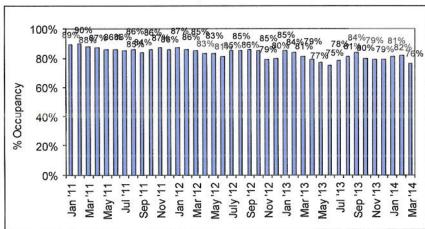
## Source of Data:

**Affinity** 

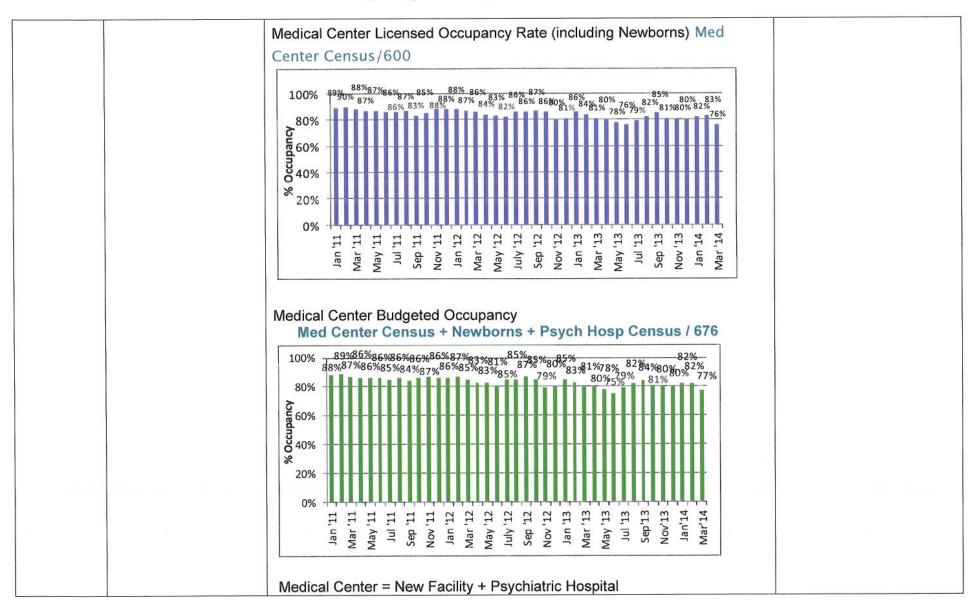
# Target: 95%

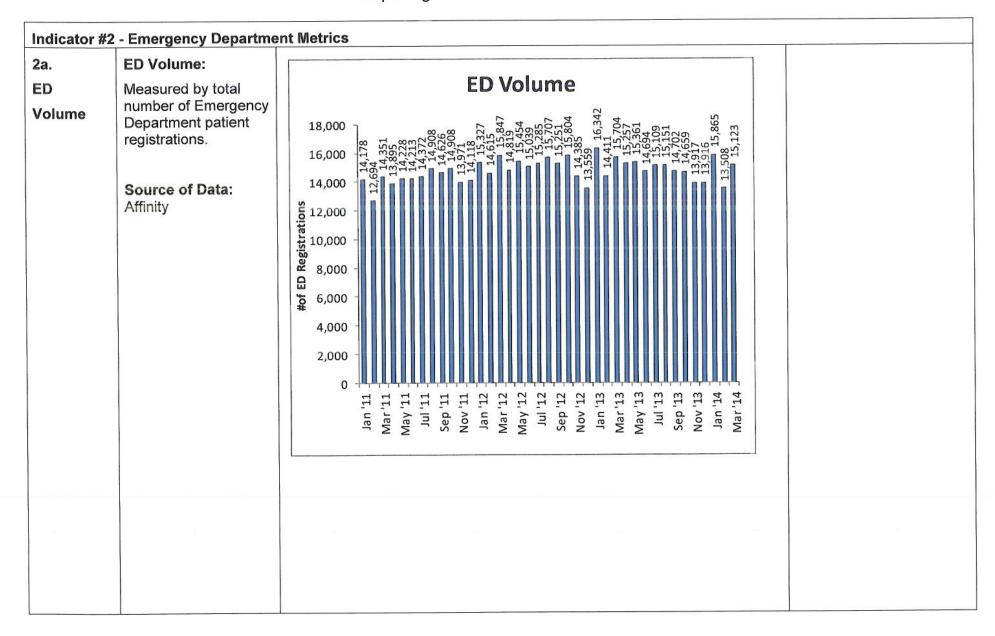
Medical Center Licensed Occupancy Rate (excluding Newborns) = Med

Center Census - Newborns / 600

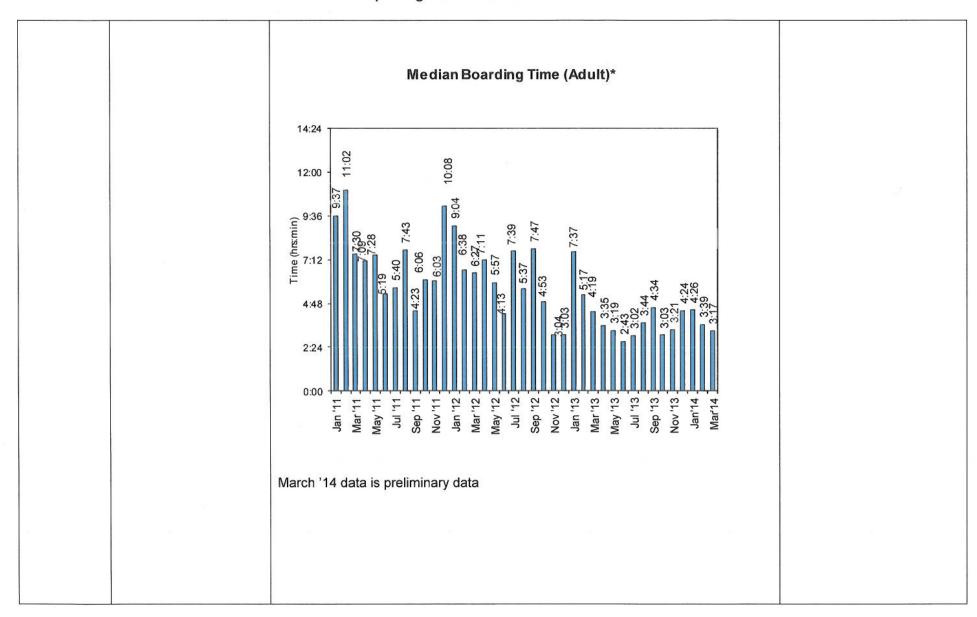


For comparison, occupancy rates reported in the old facility were reported including newborns and were based on budgeted beds.





2b. Median Emergency Department Boarding Time (EDBT)	Boarding Time: Time from MD Admit time (effective date and time of pre-admit) to time the patient actually leaves the ED en route to assigned bed (effective date and time of the ED disposition).  Calculation:	Median EDBT  14:24  12:00 - 11:22  10:08  9:36 - 9:37	
*Harris Rodde Indicator	The middle value in the set of individual boarding times for the month arranged in increasing order. If there is an even number of values, then the median is the average of the middle two values.	2:24  2:06 2:12 2:06 2:12 2:06 2:04 2:02 2:06 2:13:17 1:51 1:491:58 1:56 2:06 2:04 2:02 2:06 2:06 2:12 2:06 2:06 2:06 2:06 2:06 2:06 2:06 2:0	
	Source of Data: Affinity Target: Less than 7 hours.		



Operational Monitoring Report Reporting Period: March 2014

Indicator #2 - Emergency Department Metrics

# 2c.

# ED Wait Time

#### **ED Wait Time:**

Measured from time patient is triaged to time patient is either admitted or discharged reported as an arithmetic mean.

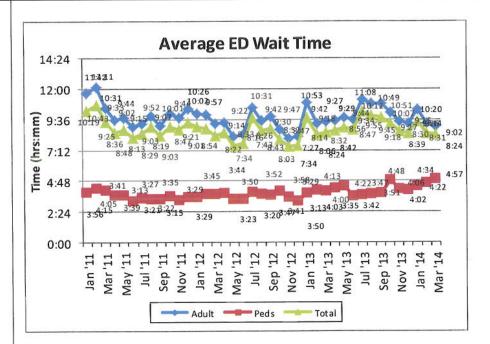
#### Definition:

Sum of all wait time values during the monthly reporting period divided by the total number of values.

# Source of Data: Affinity

# Target:

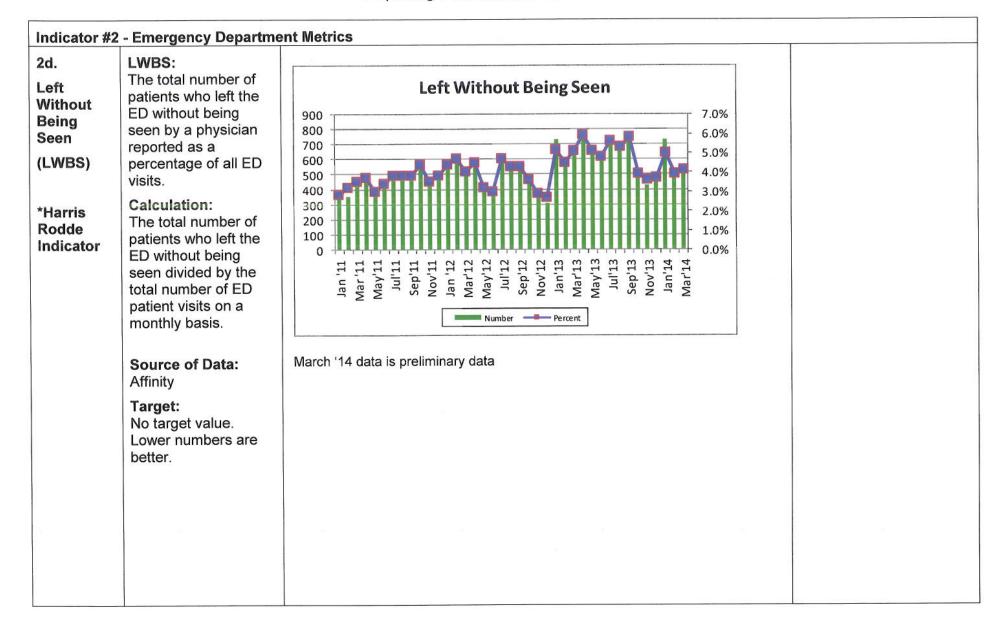
No target value. Lower numbers are better.



**Adult Wait Time:** \*Excludes Psych, Pediatric, Observation Unit, and Jail patients

Total ED Wait time: \*Excludes Psych, Observation Unit, and Jail patients

March '14 data is preliminary data



Operational Monitoring Report Reporting Period: March 2014



#### 2e.

# ED Diversion

#### **ED Diversion:**

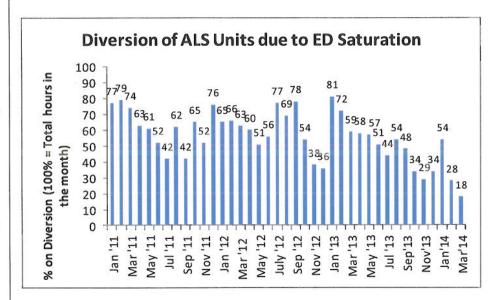
A percentage measure of the time the ED diverts ambulance traffic away from the ED, reported as a function of the reason for diversion on a monthly basis.

#### Calculation:

The total number of hours of ED diversion for a specific reason divided by the total number of available hours in a month.

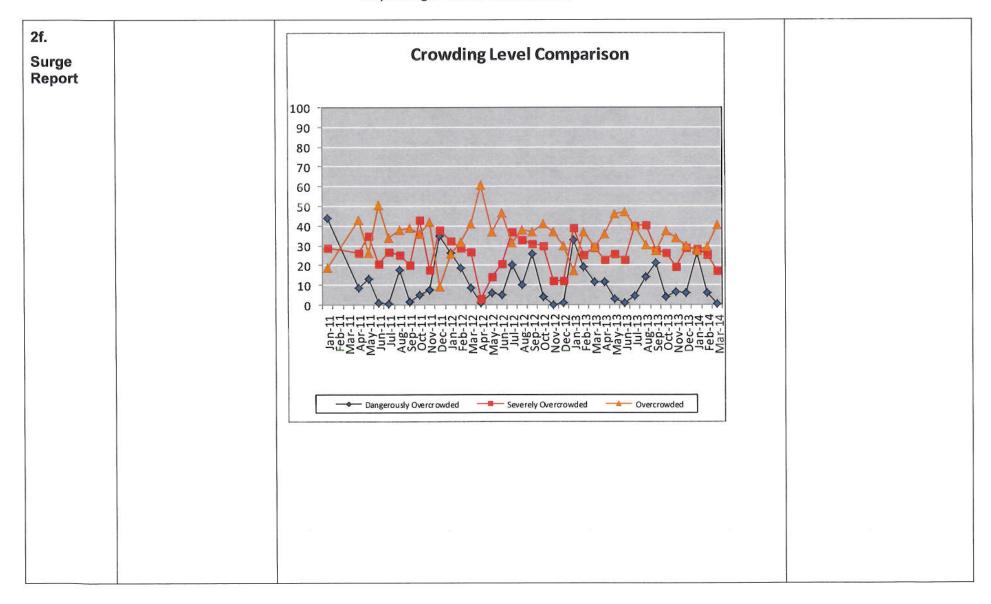
# Source of Data:

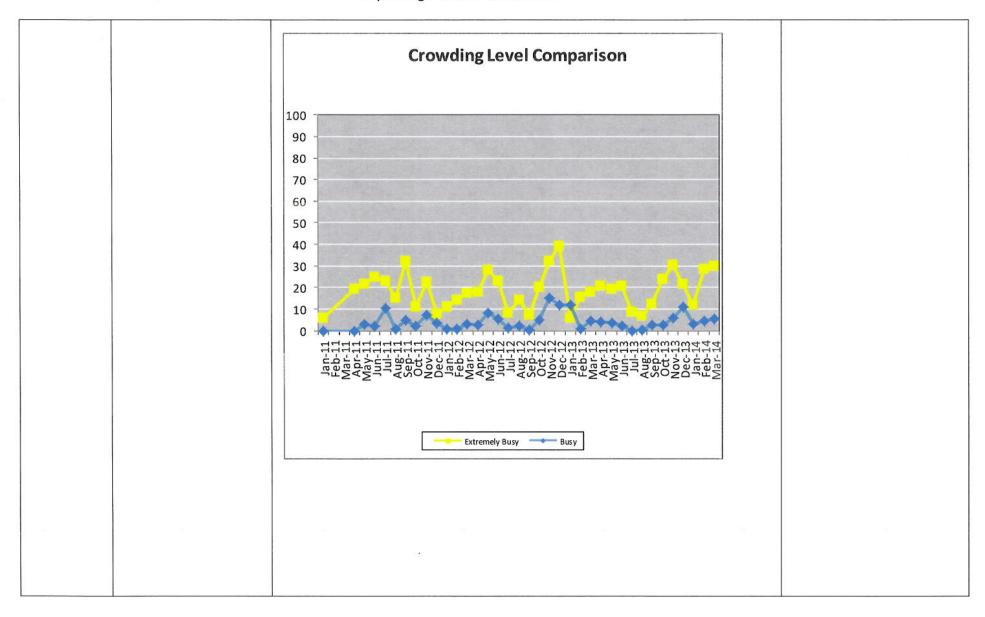
ReddiNet



### Key points:

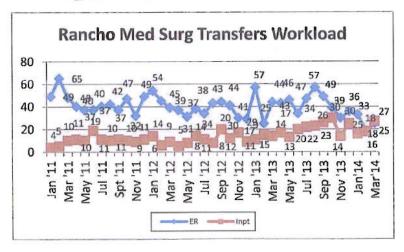
-- Diversion is for paramedic runs only; Basic Life Support ambulances still arrive. -- When diversion is requested but all hospitals in the area are on diversion, patients go to the closest hospital. Therefore, ambulances often arrive while "on diversion".

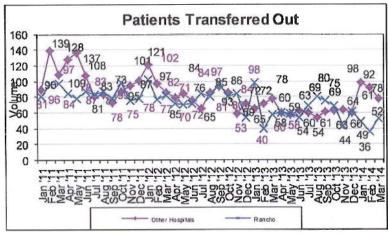




3. & 4.	Transfers:	Month of March '14					
Rancho	The volume of patients transferred	Referrals from ER:					
Los Amigos National	to RLANRC for acute hospitalization from		Med/Surg	Acute Stroke	Total		
Rehab-	the Emergency Department and from	# Met transfer criteria	2	NA	-		
ilitation Center	Inpatient Units.	# Referred to RLANRC	2	23	25		
(RLANRC)		# Transfers	2	23	25		
Transfers	Data Source:	# Denied	0	NA	=		
	Manual record keeping.	# Cancelled	0	NA	-		
	Kooping.	# Patients Refused of Those Cancelled	0	NA	-		
	Cancelled category includes patients	Referrals from Inpatients	:				
	whose condition changed leading to		Med/Surg	Acute Stroke	Total		
	higher level of care or discharge home.	# Met transfer criteria	25	NA	_		
	or alcorrange from e.	# Referred to RLANRC	25	5	30		
		# Transfers	22	5	27		
		# Denied	0	NA	-		
		# Cancelled	3	NA	-		
9	# Patients Ref Cancelled	# Patients Refused of Those Cancelled	0	NA	-	0	
		Other /Pending	0	NA	-		

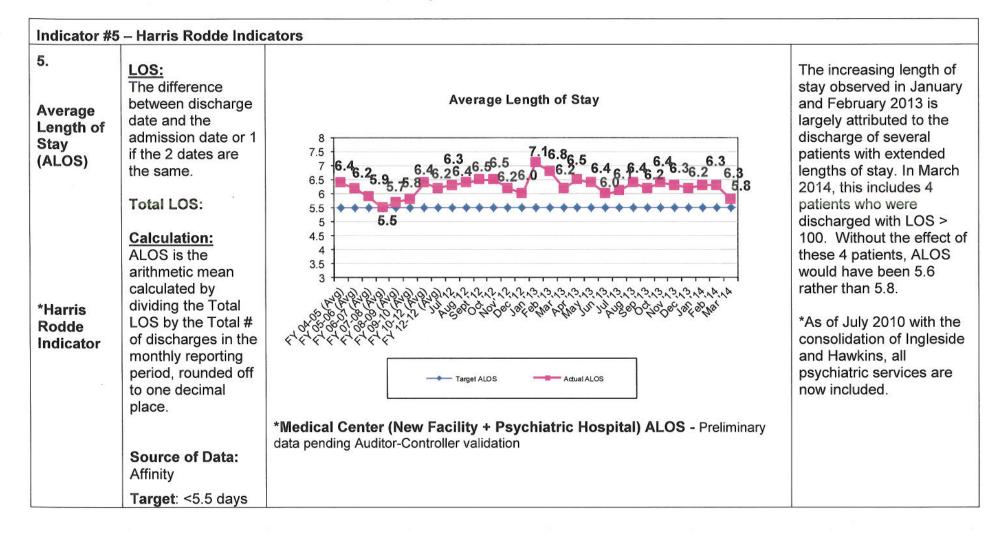
# LAC+USC Medical Center Operational Monitoring Report Reporting Period: March 2014





<sup>\*</sup> Other hospitals = Silver Lake (0), Managed Care Repatriation (78)

Data was revised to reflect total # of patients (including stroke patients) referred to Rancho Los Amigos National Rehabilitation Center



6.	Census: The total number	Date	NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Med/Surg Adolescent (20 Beds)
Pediatric Bed Census and	admitted pediatric	Jan-11	55%	60%	70%	70%
ccupancy (%)	inpatients at 12:00 AM	Feb-11	57%	68%	80%	80%
	midnight of a	Mar-11	57%	60%	70%	75%
	designated pediatric	Apr-11	55%	64%	50%	75%
diatric ICU	ward.	May-11	57%	56%	50%	80%
CU)	Occupancy:	Jun-11	70%	52%	60%	75%
eonatal ICU	The total number of	Jul-11	58%	44%	50%	70%
CU)	admitted pediatric inpatients divided by	Aug-11	58%	44%	40%	75%
diatric Unit	the total number of	Sep-11	58%	40%	50%	75%
olescent	licensed beds on that	Oct-11	55%	52%	60%	70%
	unit and reported as a	Nov-11	62%	60%	70%	75%
nit	Source of Data: Affinity	Dec-11	65%	40%	60%	70%
		Jan-12	60%	52%	60%	75%
		Feb-12	55%	56%	60%	70%
		Mar-12	55%	64%	50%	75%
		Apr-12	53%	48%	50%	65%
		May-12	42%	40%	50%	70%
		Jun-12	38%	44%	50%	60%
		Jul-12	45%	48%	60%	80%
		Aug-12	57%	48%	50%	75%
		Sep-12	63%	56%	50%	80%
		Oct-12	58%	64%	60%	70%
		Nov-12	63%	44%	50%	45%
		Dec-12	73%	36%	60%	50%
		Jan-13	63%	48%	70%	70%
		Feb-13	50%	48%	70%	75%
		Mar-13	53%	44%	60%	75%

Beds)       53%     40%     50%     55%       43%     44%     60%     45%       48%     48%     50%     35%       48%     32%     50%     60%       45%     40%     40%     75%       48%     48%     40%     80%
48%     48%     50%     35%       48%     32%     50%     60%       45%     40%     40%     75%       48%     48%     40%     80%
48%     32%     50%     60%       45%     40%     40%     75%       48%     48%     40%     80%
45%     40%     40%     75%       48%     48%     40%     80%
48% 48% 40% 80%
53% 44% 40% 55%
43% 32% 50% 60%
40% 44% 40% 60%
45% 40% 50% 75%
53% 48% 40% 60%
43% 44% 50% 45%

7.	Census:	Date	Med Surg	Jail	ICUs	Burn*	OB/GYN
•	The total number admitted inpatients at 12:00 AM midnight of a	Butto	(309 beds)	(24 Beds)	(120 Beds)	(20 Beds)	(Med Surg) (32 beds)
(%)	designated ward.	Nov-12	87%	83%	83.5 %	51%	87%
	Occupancy:	Dec-12	88%	71%	83%	44%	83%
		Jan-13	95%	73%	85%	55%	98%
Medical	The total number of	Feb-13	93%	59%	87%	61%	95%
Surgical Unit	admitted inpatients	Mar-13	91%	62%	82%	47%	93%
(Med Surg)	divided by the total	Apr-13	88%	82%	85%	57%	99%
Jail Unit (Jail)	number of licensed beds on that unit and reported as a percentage.	May-13	88%	66%	82%	57%	90%
		Jun-13	82%	71%	80%	60%	81%
		Jul-13	88%	79%	82%	42%	88%
		Aug-13	93%	79%	83%	44%	91%
CUs (Excluding		Sep-13	95%	83%	83%	50%	100%
Burn ICUs)	Source of Data:	Oct-13	91%	72%	78%	59%	95%
Juin 1000)	Affinity	Nov-13	91%	66%	82%	67%	83%
		Dec-13	90%	73%	80%	60%	83%
OB/GYN Unit		Jan-14	92%	72%	86%	45%	93%
(Med Surg)	*	Feb-14	91%	79%	85%	53%	96%
		Mar-14	87%	75%	77%	49%	73%
		* Burn= B	oth ward (10)	and ICUs (10	)		